REDACTED - FOR PUBLIC INSPECTION Rate Floor Data

			DATA COLL	ECTION - OM	B Control Nun	nber 3060-0986	
Block 1	i - Contact Inform	nation					
ROW#		DATA ELEMENT		FORMAT OF REQUESTED DATA	RESPONSE		
1	Carrier Study Area Code			6 numeric digits	330956		
2	Carrier Study Area Name			alpha characters	CenturyTel-North W	Л	
3	Service Provider Identification Number			9 numeric digits	143001842		
4	Residential Local Service Charge Effective Date			mm/dd/yyyy	6/1/2015		
5	Contact Name			alpha characters	Kenneth W. Buchar	·	
6	Contact Telephone Number (include area code)			9 numeric digits	(318) 362-1538		
7	Sheet number			numeric digit(s)	1		
8	Total Number of Sh	otal Number of Sheets			1		
	Column 1	Column 2	Column 3	Column 4	ces, Fees, and Lin	e Counts	
	Residential Local Service Charge	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Loops		
9	\$ 19.84	NA	\$ 0.77	NA			
10	\$ 19.84	NA	\$ 0.77	NA			
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TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING RATE FLOOR DATA ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data										
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported; and, to the best of my knowledge, the information reported on this form is accurate.										
Name of Reporting Carrier: CenturyTel of Northern Wisconsin, LLC d/b/a CenturyLink										
Signature of authorized officer Date 6/1/1/5										
Printed name of authorized officer David D. Cole										
Title or position of authorized officer										
Telephone number of authorized officer: (318) 388 -9000, ext									
Study Area Code of Reporting Carrier	330956	Filing Due Date for this form (mm/dd/yyyy)	7/1/2015							